U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

AUTHORIZATION TO ACT IN A REPRESENTATIVE CAPACITY

| In re Application of: | Artem G. Evdokimov et al. | | | |
|-----------------------|-------------------------------|----------------|--|--|
| Application No. | 10/634,027-Conf. #5050 | | | |
| Filed: | August 4, 2003 | | | |
| Title: | THREE DIMENSIONAL COORDINATES | ОГ НРТРВЕТА | | |
| Attorney Docket No. | 9045M2 | Art Unit: 1656 | | |

The practitioner named below is authorized to conduct interviews and has the authority to bind the principal concerned. (Note: pursuant to 37 CFR 10.57(c), a practitioner cannot authorize other registered practitioners to conduct interviews without consent of the client after full disclosure.) Furthermore, the practitioner is authorized to file correspondence in the above-identified application pursuant to 37 CFR 1.34:

| Name | Registration Number | | | |
|-------------------|---------------------|--|--|--|
| Andrea G. Reister | 36,253 | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

This is not a Power of Attorney to the above-named practitioner. Accordingly, the practitioner named above does not have authority to sign a request to change the correspondence address, a request for an express abandonment, a disclaimer, a power of attorney, or other document requiring the signature of the applicant, assignee of the entire interest or an attorney of record. If appropriate, a separate Power of Attorney to the abovenamed practitioner should be executed and filed in the United States Patent and Trademark Office.

| SIGNATURE of Practitioner of Record | | | | |
|-------------------------------------|--|--|--|--|
| Signature | S PanQ | Date 2 APR 07 | | |
| Name | Andrew A. Paul / The Procter & Gamble Company | Registration No., if applicable 46,405 | | |
| Telephone | 513 672 1825 | | | |



Docket No.: 010786.0094-US00

(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of: Artem G. Evdokimov et al.

Confirmation No.: 5050

Application No.: 10/634,027

Group Art Unit: 1652

Filed: August 4, 2003

Examiner: N. T. Nashed

For: THREE DIMENSIONAL COORDINATES OF

HPTPBETA

TRANSMITTAL LETTER

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

Enclosed are the following items for filing in connection with the above-referenced Patent Application:

- 1. Fee Transmittal (1 page);
- 2. Petition for Extension of Time (in duplicate);
- 3. Request for Continued Examination (in duplicate);
- 4. Amendment Transmittal (in duplicate);
- 5. Amendment After Final under 37 C.F.R. § 1.116 with Krueger et al. Publication;
- 6. PTO/SB/84 Authorization to Act in a Representative Capacity;
- 7. Information Disclosure Statement; and
- 8. Form used in lieu of PTO/SB/08A/B.

Please charge our Deposit Account No. 50-0740 in the amount of \$1,960.00 covering the required fees. The Director is hereby authorized to charge any deficiency in the fees filed, asserted to be filed or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Deposit Account No. 50-0740, under Order No. 010786.0094-US00. A duplicate copy of this paper is enclosed.

2

It is not believed that extensions of time or fees for net addition of claims are required beyond those that may otherwise be provided for in documents accompanying this paper. However, if additional extensions of time are necessary to prevent abandonment of this application, then such extensions of time are hereby petitioned under 37 C.F.R. § 1.136(a), and any fees required therefor (including fees for net addition of claims) are hereby authorized to be charged to our Deposit Account No. 50-0740.

Dated: May 21, 2007

Respectfully submitted,

Andrea G. Reister

Registration No. 36,253

COVINGTON & BURLING LLP 1201 Pennsylvania Avenue, N.W.

Washington, DC 20004-2401

(202) 662-6000

Attorney for Applicant



| AMENDMENT TRANSMITTAL LETTER | | | | | Docket No. 010786.0094-US00 | | |
|---|---|---|-----------------------------------|----------------------|--------------------------------|--|--|
| Application No. | | Filing | | Examine | 1 | | |
| 10/634,027-Co | onf. #5050 | August 4 | 1, 2003 | ed 1652 | | | |
| pplicant(s): Arte | m G. Evdokim | ov et al. | | | | | |
| ovention: THREE | DIMENSION | AL COORDINA | ATES OF HP | TPBETA | | | |
| Transmitted here | | | | OR PATENTS | , | | |
| The fee has been | | | | | | | |
| | , | | S AS AMENI | DED | | | |
| | Claims Remaining After Amendment | Highest Number Previously Paid | Number Extra Claims Present | Rate | | | |
| Total Claims | 23 | - 20 = | 3 | x 50.00 | 150.00 | | |
| Independent Claims | 3 | - 5 = | 0 | · x 200.00 | 0.00 | | |
| Multiple Depend | ent Claims (ch | eck if applicabl | e) | | · | | |
| Other fee (please | e specify): | | | | | | |
| TOTAL ADDIT | ONAL FEE FO | OR THIS AME | NDMENT: | | 150.00 | | |
| x Large Entity | | | | Small Entit | у | | |
| No additiona | I fee is require | d for this amer | ndment. | | | | |
| X Please charg | ge Deposit Acc | | | the amount of \$ | 150.00 | | |
| A check in th | e amount of \$ | | to cover | the filing fee is en | closed. | | |
| Payment by | credit card. Fo | orm PTO-2038 | is attached. | | | | |
| | is hereby auth below. A dup | | | Deposit Account I | No. <u>50-0740</u> | | |
| x Credit ar | ny overpaymer | it. | | • | | | |
| x Charge a | ny additional fili | ng or applicatio | n processing f | ees required under | 37 CFR 1.16 and 1.17. | | |
| Linully Andrea G. Reis | MC | eist | _ | Dated: | May 21, 2007 | | |
| Attorney/Agent | | 253 | | | | | |
| COVINGTON & 1201 Pennsylva Washington, DC | nia Avenue, N | | | | | | |
| (202) 662-5141 | | | | . • | | | |
| | | | | | | | |
| | | | | | * | | |



Docket No. AMENDMENT TRANSMITTAL LETTER 010786.0094-US00 Application No. Filing Date Examiner **Art Unit** 10/634,027-Conf. #5050 August 4, 2003 N. T. Nashed 1652 Applicant(s): Artem G. Evdokimov et al. Invention: THREE DIMENSIONAL COORDINATES OF HPTPBETA TO THE COMMISSIONER FOR PATENTS Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below. **CLAIMS AS AMENDED** Claims Highest Remaining Number Number After Previously Extra Claims Amendment Paid Present Rate **Total Claims** 23 20 3 х 50.00 150.00 Independent 3 5 0 200.00 X 0.00 Claims Multiple Dependent Claims (check if applicable) Other fee (please specify): TOTAL ADDITIONAL FEE FOR THIS AMENDMENT: 150.00 x Large Entity Small Entity No additional fee is required for this amendment. x | Please charge Deposit Account No. 50-0740 150.00 in the amount of \$ A duplicate copy of this sheet is enclosed. A check in the amount of \$ to cover the filing fee is enclosed. Payment by credit card. Form PTO-2038 is attached. X The Director is hereby authorized to charge and credit Deposit Account No. as described below. A duplicate copy of this sheet is enclosed. x Credit any overpayment. Charge any additional filling or application processing fees required under 37 CFR 1.16 and 1.17. Dated: May 21, 2007 Andrea G. Rei Attorney/Ager No.: 36,253 COVINGTON & BURLING LLP 1201 Pennsylvania Avenue, N.W. Washington, DC 20004-2401 (202) 662-5141

PTO/SB/17 (04-07)

Approved for use through 04/30/2007. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

| Effective on 12/08 | Complete if Known | | | | | | |
|--|-------------------------|-------------|--|------------|--------------------------|-------------|--------------------------|
| Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL | | | Application Number 10/634,027-Conf. #5050 | | |) . | |
| | | | Filing Date | | August 4, 2003 | | |
| _ : | | | First Named Inv | entor | Artem G. Evdokimov | | |
| For FY 2007 | | | Examiner Name N. T. Nashed | | | | |
| Applicant claims small entity star | tus. See 37 CFR 1. | 27 | Art Unit 1652 | | | | |
| TOTAL AMOUNT OF PAYMENT | (\$) 1,960. | 00 | Attorney Docket | No. | 010786.0094-0 | JS00 | |
| METHOD OF PAYMENT (check | all that apply) | | | | | | |
| Check Credit Card | Money Order | Nor | ne Other (| please ide | ntify): | | |
| X Deposit Account Deposit Account | Number: <u>50-0740</u> | Deposit Acc | ount Name: | C | ovington & Burlin | ng LLP | |
| For the above-identified dep | osit account, the | Director is | hereby authorize | ed to: (ch | eck all that apply) | | |
| x Charge fee(s) indicate | d below | • | Charg | e fee(s) i | ndicated below, ex | cept for t | he filing fee |
| Charge any additional fee(s) under 37 CFR 1 | | yments o | x Credit | any over | payments | | |
| FEE CALCULATION | | | | | | | |
| 1. BASIC FILING, SEARCH, AND E | XAMINATION FE | ES | | | | | |
| | LING FEES | | ARCH FEES | ·EXAM | INATION FEES | • | |
| Application Type Fee (\$ | Small Entity Fee (\$) | Fee (\$ | Small Entity | Fee (\$ | Small Entity | Food | Pald (\$) |
| Utility 300 | | 500 |) <u>Fee (\$)</u> 250 | 200 |) <u>Fee (\$)</u> 100 | rees | raiu (ş) |
| Design 200 | | 100 | 50 | 130 | 65 | | |
| Plant 200 | | 300 | | | | | |
| | | | 150 | 160 | 80 | | |
| Reissue 300 | | 500 | 250 | 600 | 300 | | |
| Provisional 200 | 100 | 0 | 0 | 0 | 0 | | |
| 2. EXCESS CLAIM FEES | | | | | | Fee (\$) | Small Entity Fee (\$) |
| Fee Description Each claim over 20 (including Reiss | sues) | | • | | | 50 | 25 |
| Each independent claim over 3 (incl | uding Reissues) | | | | | 200 | 100 |
| Multiple dependent claims | | | | • | • | 360 | 180 |
| Total Claims Extra Claims | Fee (\$) | Fee F | Paid (\$) | <u> </u> | Multiple Depende | nt Claims | |
| 3 -20=3 | x 50.00 = | 15 | 0.00 | <u> </u> | ee (\$) F | ee Paid (S | <u>\$)</u> |
| HP = highest number of total claims paid for | r, if greater than 20. | | | | | | <u> </u> |
| Indep. Claims Extra Claims | Fee (\$) | Fee F | Paid (\$) | • | | | |
| | × <u> </u> | | <u>o .</u> | | | | |
| HP = highest number of independent claims | paid for, if greater th | an 3. | | | • | | |
| 3. APPLICATION SIZE FEE | | | | | | | |
| If the specification and drawings ex- listings under 37 CFR 1.52(e)), | the application si | of paper | excluding electrons of the control o | onically f | filed sequence or o | computer | 0 |
| sheets or fraction thereof. See 3 | | | | oi siliali | entity) for each ac | iditional 5 | 0 |
| Total Sheets Extra Sheet | | | 1.7 | tion there | eof Fee (\$) | Foo | Paid (\$) |
| Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) - 100 = /50 = (round up to a whole number) x = | | | | | | | |
| 4. OTHER FEE(S) Fees Paid (\$) | | | | | | | |
| Non-English Specification, \$130 fee (no small entity discount) | | | | | | | |
| Other (e.g., late filing surcharge): 1253 Extension for response within third month 1,020.00 1801 Request for continued examination (RCE) (see 37 790.00 | | | | | | | |
| | | | | | | | |
| SUBMITTED BY Signature | //// / | anti | Begistration No. | 26.252 | Telephone | (202) 66 | O 5141 |
| Name (Print/Type) Andrea G. Reiste | XIX | | (Attorney/Agent) | 36,253 | Date | May 21 | |